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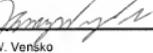
TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/697,599
Filing Date	October 29, 2003
First Named Inventor	Austin L. Gurney
Art Unit	1646
Examiner Name	Hissong, Bruce D.
Attorney Docket Number	GNE-0125A

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ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer			
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD			
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53				
<table border="1"> <tr> <td>Remarks</td> </tr> <tr> <td>Please charge any fees, including fees for extension of time, or credit overpayment to Deposit Account No. 07-1700.</td> </tr> </table>			Remarks	Please charge any fees, including fees for extension of time, or credit overpayment to Deposit Account No. 07-1700.
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<table border="1"> <tr> <td>Remarks</td> </tr> <tr> <td>Please charge any fees, including fees for extension of time, or credit overpayment to Deposit Account No. 07-1700.</td> </tr> </table>			Remarks	Please charge any fees, including fees for extension of time, or credit overpayment to Deposit Account No. 07-1700.
Remarks				
Please charge any fees, including fees for extension of time, or credit overpayment to Deposit Account No. 07-1700.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm Name	GOODWIN PROCTER LLP			
Signature				
Printed name	Nancy W. Venisko			
Date	April 22, 2008	Reg. No. 36,298		

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being electronically transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature		Date	April 22, 2008
Typed or printed name	Rachel Mena		

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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